

Name in Full

Certificate of Death

William H. Brown

Died at

Town
Collins

County

St Mary's

MARYLAND

Date 1903

Month Day

2-10

Y. M. D.

Age 23 1 16

Native of

Occupation

Ind. of Steamer

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's

Name

Helen Brown

Mother's

Maiden Name

Mary Hecht

Cause of

Primary

Drowning

How long sick

Death

Immediate

172

Accident, Suicide, Homicide

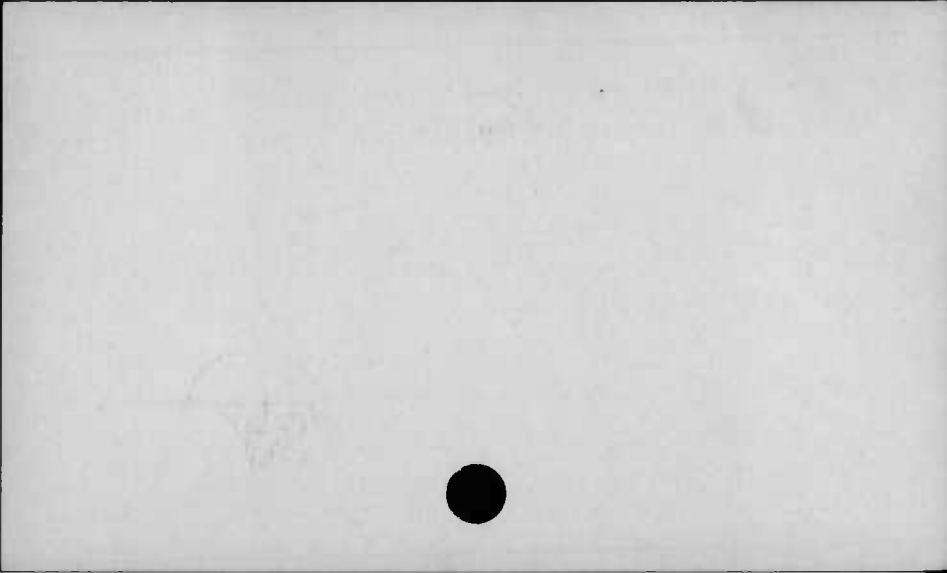
Reported by

Rev. V. Palmer

Address

Palmer

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Margaret S. Hurry

Town

County

Died at

Leonardtown H. Mary

MARYLAND

Date 1903

Month Day
Feb 11

Age 71

Y. M. D.

Native of

H. Mary

Occupation

Assistant Housekeeper

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

Husband
of

Wife

Father's

Name

Cornelius Hurry

Mother's

Maiden Name

Cause of

Primary

Death

Immediate

La Grippe

10

How long sick

7 days

Accident, Suicide, Homicide

Reported by

H. F. Greenwell

Address

Leonardtown Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Philip Gray

Town

County

Died at

Fennelltown, Pennsylvania

St Marys

MARYLAND

Data 1903

Month

Day

Y.

M.

D.

Native of

Occupation

Feb.

19

Age

6

St Marys

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Husband
of

Wife

Father's

Name

Mother's

Maiden Name

James P. Gray

Gertrude Mattingley

Cause of

Primary

Death

Immediate

Enter polio

105

How long sick

Accident, Suicide, Homicide

Reported by

H. P. Greenwell

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

Jack Lacey
 Town *Millicott* County *St. Mary's* MARYLAND
 Died at
 Date 19 *03* Month *Feb.* Day *14* Y. *64* M. *-* D. *-* Native of *md* Occupation *Farmer*
 Male *White* Married *Widow* Divorced *—*
 Female *Colored* Single *Widower* Number of children living *—*

Husband of *Bettie Lacey*
 Wife
 Father's Name *James Lacey* Mother's Maiden Name *May Lacey*
 Cause of Death { Primary *Pneumonia* How long sick *9 days*
 Immediate *93* Accident, Suicide, Homicide

Reported by *Roll V. Palmer M.D.*
 Address *Palmer*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name In Full

Certificate of Death

Rosalie Mattingley
 Died at *Choptico* ^{Town} *St. Mary's* ^{County} MARYLAND

Date 1903 *Feb. 12* Month Day Y. M. D. Age *3*
~~Male~~ White Married Widow Divorced
 Female Colored Single Widower Number of children living

Husband of
 Wife
 Father's Name Mother's Maiden Name

Cause of Death { Primary *Caught under falling* How long sick
 Immediate *Chut - body -* Accident, Suicide, Homicide

Reported by *L. B. Johnson* 166
 Address *Myung v*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.



Name in Full

Certificate of Death

James Vannant
 Died at ^{Town} *Thibault* ^{County} *St. Mary's* MARYLAND
 Date 19 *00* ^{Month} *Feb.* ^{Day} *15* | Age *94* - ^{Y.} *-* ^{M.} *-* ^{D.} *-* | ^{Native of} *England* | ^{Occupation} *Housewife*
 Male ☒ White ☒ Married ☒ Widow ☒ Divorced ☐
 Female ☐ Colored ☐ Single ☐ Widower ☐ Number of children living *3*
 Husband of *Jane Vannant*
 Wife *Jane Vannant*
 Father's Name *Jane Vannant* Mother's Maiden Name *Jane Vannant*
 Cause of Death { Primary *Pneumonia* | How long sick *93*
 Immediate *93* | Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

